Patent Attorney Docket No. <u>450100-03302</u>

In re F	Patent Application of	MAIL STOP: AF								
Tatsus	shi Nashida, et al.) Group Art Unit: 2424								
Applic	cation No.: 09/870,296) Examiner: Hossain, Farzana E.								
Filed:	May 30, 2001) Confirmation No.: 7330								
For:	RECORDING SYSTEM AND RECORDING SUBSTITUTION SYSTEM)))								
AMENDMENT/REPLY TRANSMITTAL LETTER										
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Date: August 4, 2010 August 4, 2010										
Sir:										
Enclosed is an Amendment under 37 C.F.R. § 1.116 for the above-identified patent application.										
	A Petition for Extension of Time is enclosed.									
	Terminal Disclaimer(s) and the $\hfill \$70 \hfill \140 fee per Disclaimer due under 37 C.F.R. \S 1.20(d) are enclosed.									
	Also enclosed is/are									
	Small entity status is hereby claimed.									
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\text{\$\sumsymbol{\text{\$\geq}}\$} \$\$810 fee due under 37 C.F.R. § 1.17(e).									
	Applicant(s) request that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.									
	Applicant(s) previously submitted _ which continued examination is requ	onfor ested.								
	$\label{eq:applicant} \begin{split} & Applicant(s) \ requests \ suspension \ of action \ by \ the \ Office \ until at least \\ & \underline{\qquad}, \ which \ does \ not \ exceed \ three \ months \ from \ the \ filing \ of \ this \ RCE, in accordance \ with 37 \ C.F.R. \ \S \ 1.103(e). \ The \ required \ fee \ under \ 37 \ C.F.R. \ \S \ 1.17(i) \ is \ enclosed. \end{split}$									
	A Request for Entry and Consideration of Submission under 37 C.F.R. §1.129(a) (1809/2809) is also enclosed.									

	No additional cla	im fee is c	laimed							
An additional claim fee is required, and is calculated as shown below:										
		AMEN	DED CLAIMS	3		1				
		No. of Claims	Highest No of Claims Previously Paid for	Extra Claims	Rate	Add	litional Fee			
Total Claims 9		9	20	0	x 52 (1202)	S	0			
Independent Claims		4	4	0	x 220 (1201)	s	0			
☐ If multiple dependent claims are presented, add \$ 390 (1203)							0			
Total	Claim Amendment	s	0							
☐ Sr	nall Entity Status cla	\$	0							
TOTA	L ADDITIONAL	s	0							
L			***************************************							
	Chargeto Deposit Account No. 50-0320 for the fee due.									
	A check in the amount ofis enclosed for the fee due.									
	Charge to credit card.									
The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-0320.										
	Respectfully submitted,									
Frommer Lawrence & Haug LLP										
Date:	August 4, 2010			en Marcie	Emas No. 32,131					